



August 30, 2005

Arizona Department of Environmental Quality
Contract and Procurement Section
Attn: Barbara Dull, Contract Officer
1110 West Washington Street
Phoenix, AZ 85007-2935

Re: Hydrogeologic, Inc.

Dear Ms. Dull:

Hydrogeologic, Inc. currently carries Automobile Liability insurance for hired and non-owned vehicles with Hartford Fire Insurance Company with a \$1,000,000 combined single limit. This policy also includes additional insured status where required by written contract.

Hydrogeologic, Inc. currently carries Workers Compensation and Employers Liability with Hartford Fire Insurance Company. The Workers Compensation provides statutory benefits for employees and the Employers Liability has limits of \$1,000,000 each accident; \$1,000,000 per employee; \$1,000,000 policy limit. This policy includes a waiver of subrogation where required by written contract.

Please refer to the attached certificate of insurance for any questions.

Sincerely,

A handwritten signature in black ink that reads 'Stacy Rosen'.

Stacy Rosen
Account Manager

Technology Practice

20 South King Street, Leesburg, Virginia 20175 • 703-777-2341 • 202-785-5941 • Fax • 703-771-1852
2033 Sixth Avenue, Suite 730, Seattle, Washington 98121 • 206-269-0122 • Fax • 206-269-0179



ACORD™ CERTIFICATE OF LIABILITY INSURANCEDATE (MM/DD/YYYY)
08/30/05

PRODUCER Armfield Harrison & Thomas Inc 703-777-2341 20 South King Street Leesburg, VA 20175	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED HydroGeologic, Inc. 1155 Herndon Pkwy., Suite 900 Herndon, VA 20170-5534	INSURERS AFFORDING COVERAGE INSURER A: Hartford Ins. INSURER B: INSURER C: INSURER D: INSURER E:	NAIC #

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$	
A		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	42UUQTA0049	03/27/05	03/27/06	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$	
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$	
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$	
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	42WEQNK8502	03/27/05	03/27/06	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000	
		OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

The State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Contractor, involving (See Attached Descriptions)

CERTIFICATE HOLDER

Arizona Department of Environmental Quality
Attn: Barbara Dull
1110 West Washington Street
Phoenix, AZ 85007-2935

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



DESCRIPTIONS (Continued from Page 1)

automobiles leased, hired or borrowed by the Contractor. A waiver of subrogation applies on the Auto Liability and Workers Compensation/Employers Liability policies.2

BREITSTONE & CO. INSURANCE SERVICES

PETER C. BREITSTONE
RODNEY J. TAYLOR
GREGORY E. SCHILZ
HOWARD M. TOLLIN

50 CALIFORNIA STREET
SUITE 1500
SAN FRANCISCO, CA 94111
TEL (415) 277-5901
FAX (415) 277-5902
CALIFORNIA LICENSE #: 0725967

534 WILLOW AVENUE
SUITE 200
CEDARHURST, NY 11516
TEL (516) 569-2550
FAX (516) 569-2016

August 30, 2005

Cathy Nelson
Chief Contracting Officer
Hydrogeologic, Inc.
1155 Herndon Parkway, suite 900
Herndon, VA 20170

RE: HGL AZ Pollutants Solicitation

Dear Cathy,

Please find attached a Certificate of Insurance. This Certificate provides evidence of the insurance in place with respect to Professional/Pollution Liability; Umbrella Liability and General Liability Insurance. The Umbrella provides excess coverage of 4 million over all HGL's primary coverage; GL, Auto & Professional. This then provides for a total of 5 million in limits for each primary coverage line.

If you need further documentation or have any questions, please do not hesitate to contact me.

Thank You,



Gregory Schilz

ACORD™ CERTIFICATE OF LIABILITY INSURANCEDATE (MM/DD/YYYY)
8/30/2005

PRODUCER BREITSTONE & CO. LTD. P.O. BOX 388 - 534 WILLOW AVENUE CEDARHURST, NY 11516		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED HYDROGEOLOGIC, INC. 1155 HERNDON PARKWAY, SUITE 900 HERNDON, VA 20170		INSURERS AFFORDING COVERAGE	NAIC #
		INSURER A: AMERICAN INTL SPECIALTY LINES INS CO	
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR (ADD'L LTR INSUR)	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	PROP 6439388	3/27/2005	3/27/2006	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP. (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
A	EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$	PROU6439389	3/27/2005	3/27/2006	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER				WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	PROFESSIONAL/POLLUTION	PROP 6439388	3/27/2005	3/27/2006	\$1,000,000 INC/ \$2,000,000 AGG

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

The State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees is included as additional insureds with respect to liability arising out of the activities performed by or on behalf of the contractor. Waiver of Subrogation applies. Umbrella is also excess over the Automobile Liability.

CERTIFICATE HOLDER

EVIDENCE OF COVERAGE

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



(EVIDENCE OF COVERAGE-8.30.05)